Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV` 08/01/2012)

Calendar Year: Entity Name:	2012 Virginia Mason	Medical Center					092/CH3 23/ (F	<u> </u>
(A)Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown (i) Base Compensation	of W-2 and/or 1099 Note: (ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation	(C) Retirement and Deferred Compensation	(D)Non- Taxable Benefits	(E) Total
¹ Gary Kaplan	Yes	Virginia Mason	1,039,978	449,871	17,788	2,199,932	30,109	3,737,678
² Sarah Patterson	No	Virginia Mason	481,104	178,543	252,850	131,458	26,257	1,070,212
3 Suzanne Anderson	No	Virginia Mason	469,126	174,911	25,284	57,410	17,403	744,134
4 Charleen Tachibana	No	Virginia Mason	365,491	108,607	19,879	52,083	20,741	566,801
⁵ William Poppy	No	Virginia Mason	357,020	107,762	40,006	25,887	32,755	563,430
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J http://www.irs.gov/pub/irs-pdf/i990sj.pdf

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135 email: hos@doh.wa.gov